



ORGANIZATION NAME: _____

ORGANIZATION CONTACTS: _____

MEMBERS COUNCIL REPRESENTATIVE:

Name: _____

Title: _____

Address: _____

City _____

State _____ Zip _____

Office Number: _____

Mobile Number: _____

Email: _____

FINANCIAL CONTACT:

Name: _____

Title: _____

Address: _____

City _____

State _____ Zip _____

Office Number: _____

Mobile Number: _____

Email: _____

ORGANIZATION INFORMATION:

1. Insert a brief company description here. In particular, what kinds of goods or services are provided by your company or organization?

2. Describe your organization's current level of U.S. capability and resources, those anticipated during the project work, and/or planned in the future, including employment, funding, and investments in cost share within the U.S. related to your participation in RAPID.

3. What R&D facilities or operations outside the US related to modular chemical process intensification does your company have?

4. Describe the anticipated benefits of your membership and/or participation in projects to the success of RAPID's mission. U.S. economic benefit, the project team (if applicable), and the broader membership. How can your organization contribute to the RAPID expertise base?

**OVERALL ORGANIZATION INFORMATION**

(Check all that apply):

- ☐ Small Business (<500 employees)
- ☐ Large Business (>500 employees)
- ☐ Not for Profit/Academic Institution
- ☐ Foreign Control/Ownership
(50% or greater owned or controlled)

Parent Organization(s)

Name: _____

Country of Incorporation of Parent
Organization(s): _____

- ☐ Minority Owned
- ☐ Woman Owned

TOTAL EMPLOYEES IN THE U.S.:

- ☐ 1-10 ☐ 11-50 ☐ 51-250
- ☐ 251-500 ☐ 501-1000 ☐ 1001-2500
- ☐ >2500

DESIGNATE INTEREST AREA(S):

- ☐ Intensified Process Fundamentals
- ☐ Module Manufacturing
- ☐ Modeling & Simulation
- ☐ Chemicals & Commodity Processes
- ☐ Renewable Bioproducts
- ☐ Natural Gas Upgrading

U.S. EMPLOYEES' JOB FUNCTIONS

(Check all that apply):

- ☐ Sales
- ☐ Technical Service
- ☐ Research & Development
- ☐ Manufacturing
- ☐ Management
- ☐ Engineering
- ☐ Consulting

MEMBERSHIP TYPE REQUESTED:

Check the requested annual Membership Type & Fee:

Industrial Membership:

- ☐ Premier - \$50,000
- ☐ Choice - \$20,000
- ☐ Enabling - \$5,000

Academic/National Lab/Non-Profit:

- ☐ Premier - \$7,000
- ☐ Choice - \$7,000
- ☐ Enabling - \$7,000
- ☐ Not sure, would like to discuss.

SPECIAL ACKNOWLEDGEMENTS

As a participant in RAPID and in recognition of the requirements for membership and engagement in a future RAPID project, please be aware that your membership is pending regarding these three important requirements:

- Export Control
- U.S. Manufacturing Plan
- Performance of Work in the U.S.

I hereby certify that the above statements are true and correct to the best of my knowledge. I understand and agree that any false information, misrepresentation, or omission of facts in this application and the application process may be justification for refusal to approve this application for membership.

Signature of Authorized Representative _____

Printed Name of Authorized Representative _____ Date: _____